

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TR	49 983	5/23/01 06-22-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	3/18/01
2	✓ 3/18/01
3	✓ 3/18/01
4	✓ 3/18/01
5	✓ 3/18/01
6	✓ 3/18/01
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13	✓
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16	✓
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31	✓
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49	✓
50	✓

Claim	Date
Final	
Original	
51	N
52	N
53	N
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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